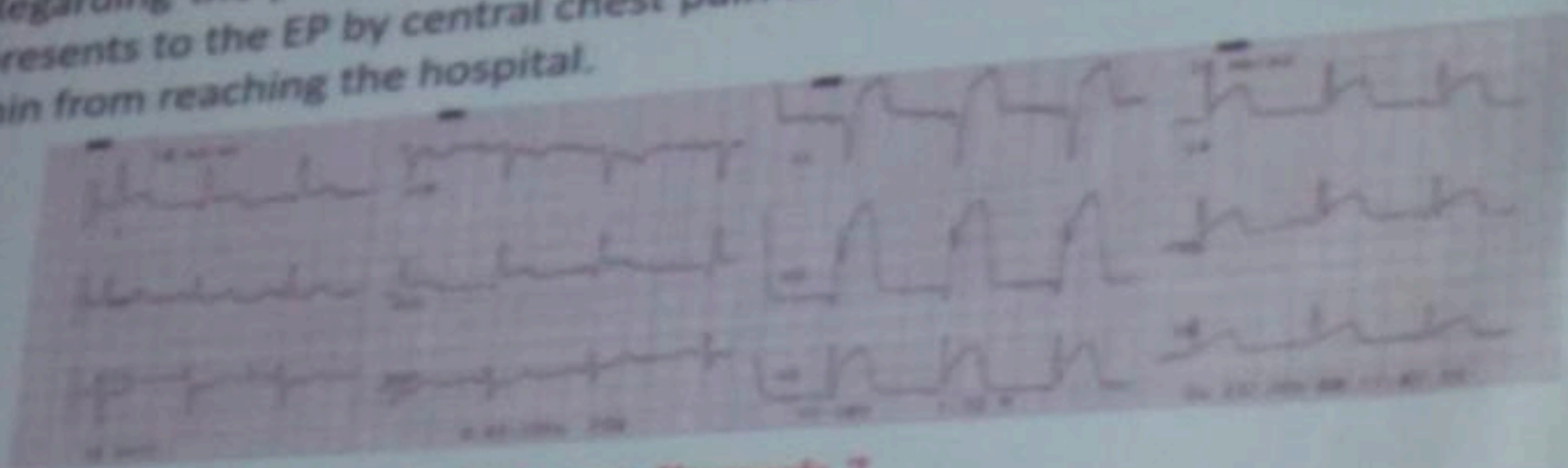


Regarding the patient in the previous question who is 50-year-old male and presents to the EP by central chest pain for 5 hours. The ECG is done within 10 min from reaching the hospital.



Q 15- What is the next step after your diagnosis ?

- A. Referral to surgery
- B. Start colchicine with NSAIDs
- C. Refer to Cath lab for PCI
- D. Start IV anticoagulation

A 78-year-old female with history of hip replacement 2 weeks ago. Her right lower limb is swollen for 3 days. She presents to the ER with acute shortness of breath, tachycardia and pleuritic chest pain. She is vitally stable and her ECG is normal apart from sinus tachycardia.

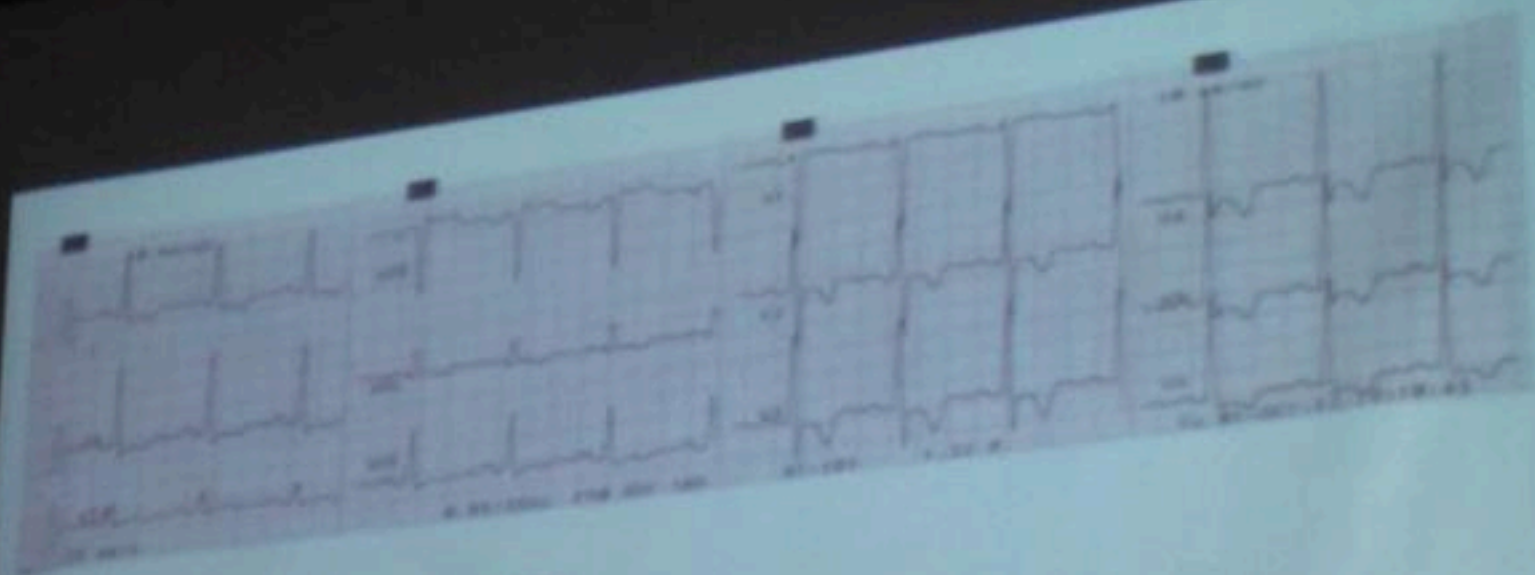
Q 19- What is the next step after your diagnosis ?

- A. Emergency Coronary Angiography
- B. CT pulmonary Angiography
- C. Vascular consultation
- D. Lower limb arterial duplex scanning

A 36-year-old female is admitted in ophthalmology department for subluxation. They notice that her BP is 160/40. You are asked for your opinion regarding management of her hypertension. You notice that she has diastolic murmur on left parasternal region.

Q 20- The following is true regarding this patient EXCEPT

- A. She has significant aortic regurgitation
- B. Pistol shot may be auscultated on her femoral artery
- C. The inheritance of this problem is autosomal dominant
- D. Long acting penicillin is needed for life



Q 7.- Select the correct diagnosis ?

- A. Left axis deviation
- B. IHD with NSTEMI
- C. LVH and strain
- D. Left atrial enlargement

complaints of exertional
dyspnea. An Early diastolic
murmur is detected at the left sternal border.

Which of the following is the most likely additional finding in this patient?



55y year old male presents to the your clinic complaining of exertional dyspnea and occasional chest discomfort and headache. An Early diastolic murmur is detected on cardiac auscultations at the left sternal border.

Q 1- Which of the following is the most likely additional finding in this patient?

- A. Bounding pulses
- B. Fixed splitting of S2
- C. Pulsus paradoxus
- D. Pulsus parvus and tardus

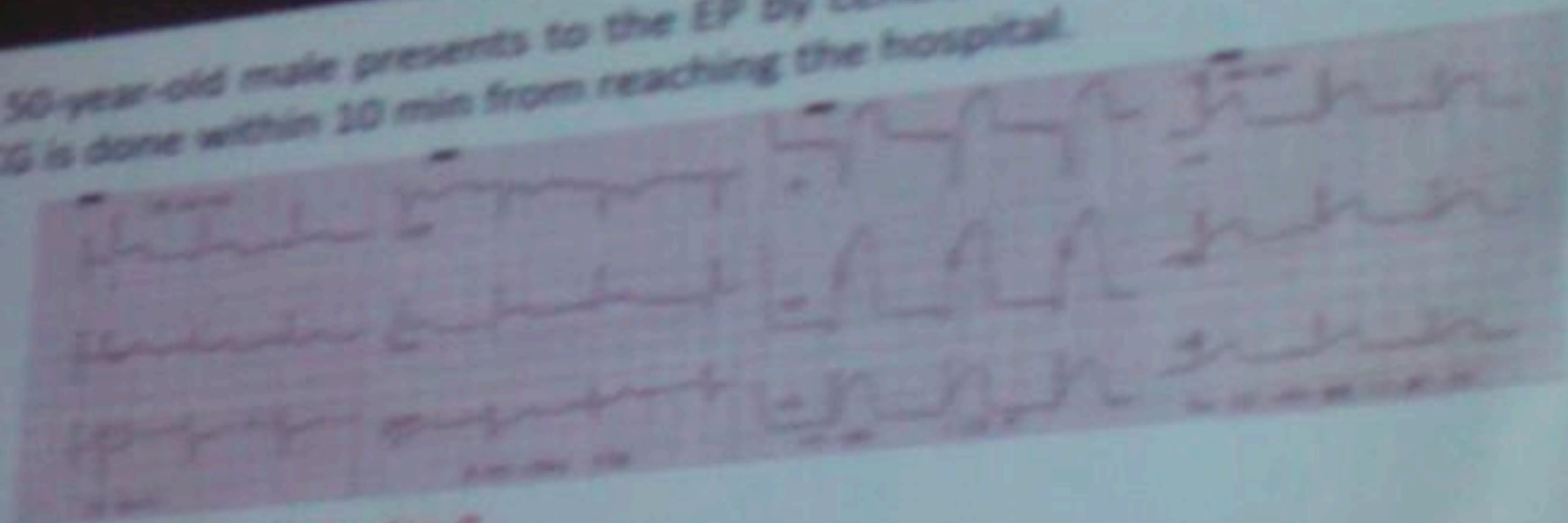


A 43-year-old male presents to your clinic by systemic hypertension. He is non smoker and not known to be diabetic. He has a normal creatinine and potassium. His BP can not reach the target by lifestyle modification or monotherapy by ACE inhibitor. The BP becomes well controlled by combination of ACE inhibitor and calcium channel blocker.

Q 13- What is the target BP in this patient ?

- A. $< 130/95$
- B. $< 150/95$
- C. $< 140/90$
- D. None of the above

A 50-year-old male presents to the EP by central chest pain for 5 hours. This ECG is done within 10 min from reaching the hospital.



Q 14- This patient is having ?

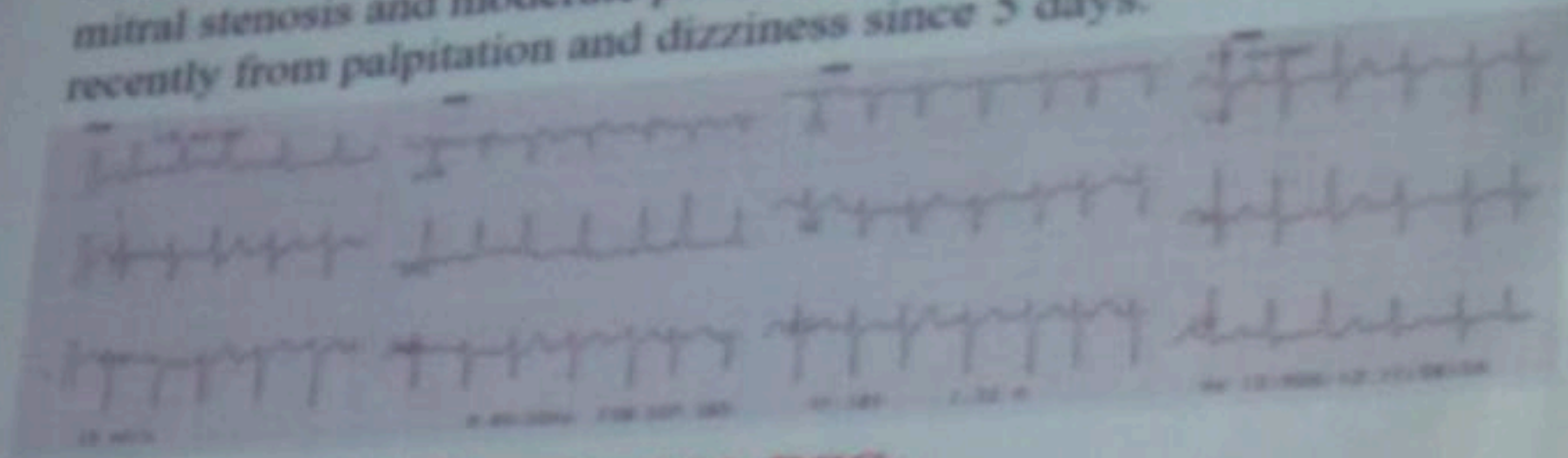
- A. NSTEMI
- B. Acute pulmonary embolism
- C. Acute pericarditis
- D. Anterior STEMI

A 69-year-old man is evaluated for hypertension. He complains of morning headache. He has medical history of type 2 diabetes mellitus, CABG and carotid endarterectomy. His medications include ACE inhibitor, beta-blocker, calcium channel blocker and a diuretic. However, his BP is still 190/120.

Q 8- Which diagnosis is most likely to uncontrolled hypertension?

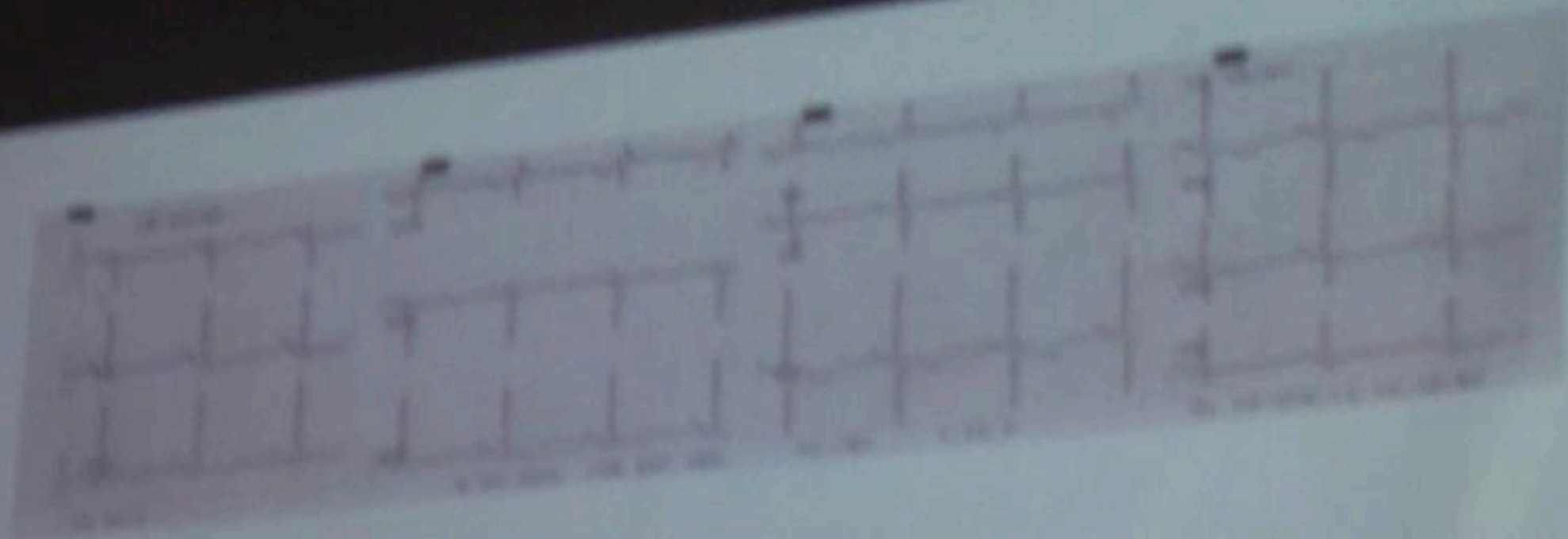
- A. Aortic Coarctation
- B. Abdominal aortic aneurysm
- C. Un-recommended combination of drugs
- D. Renal artery stenosis

This is the ECG of a 45y female with history of RHD, moderate mitral stenosis and moderate pulmonary hypertension. She suffers recently from palpitation and dizziness since 5 days.



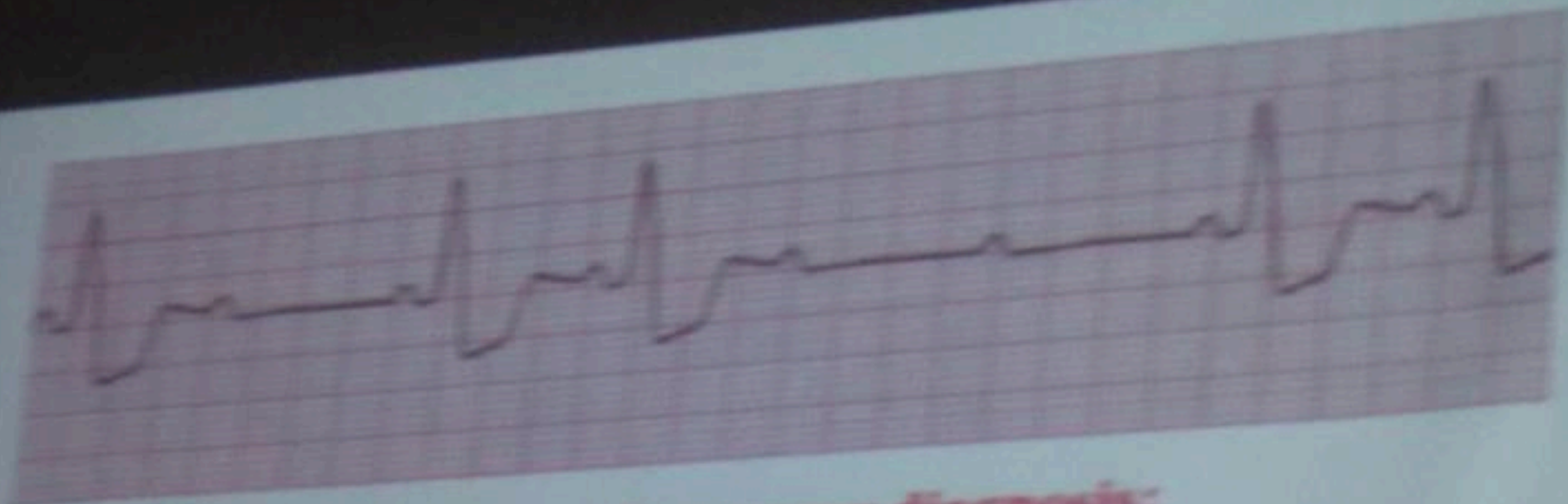
Q 17- What is your diagnosis of this ECG:

- A. Supraventricular tachycardia
- B. Rapid atrial fibrillation
- C. Ventricular tachycardia with rapid rate
- D. None of the above



Q 4. Select the correct cardiac axis?

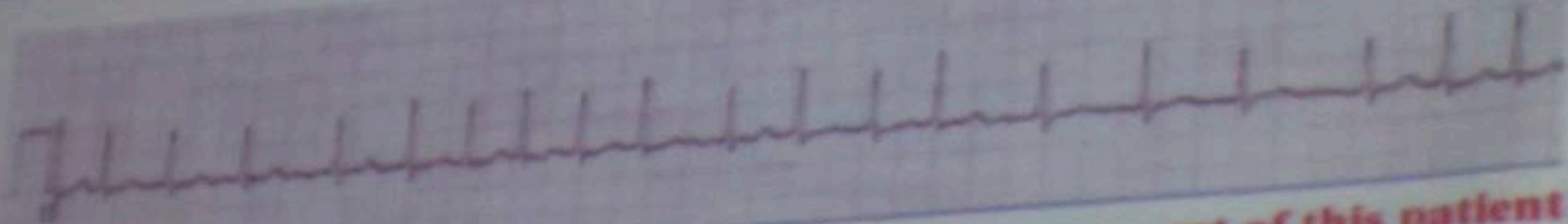
- A. Right axis deviation
- B. Normal axis
- C. Left axis deviation
- D. Extreme axis deviation



Q 18- Select the proper diagnosis:

- A. Sinus bradycardia
- B. First degree heart block
- C. Second degree heart block
- D. Third degree heart block

A 69-year-old male undergoes successful CABG and AVR. On the operative day he complains of shortness of breath, fatigue and chest tightness. His BP is 70/30, the HR is 140/min and RR is 30/min. Auscultation reveals bilateral basal crackles. An ECG rhythm strip is obtained.



Q 5. Which of the following is the next step in the management of this patient?

- A. Intravenous beta-blockers
- B. Temporary pacing
- C. DC cardioversion
- D. Digitalis

A 32-year-old female referred to cardiology out-patient clinic from the oncology department with progressive dyspnea. She gives a history of chemotherapy and radiotherapy. She has this recent chest X-ray.

Q 6- What is the next recommended investigation?

- A. ECG
- B. MSCT pulmonary angio
- C. Echocardiography
- D. SPECT



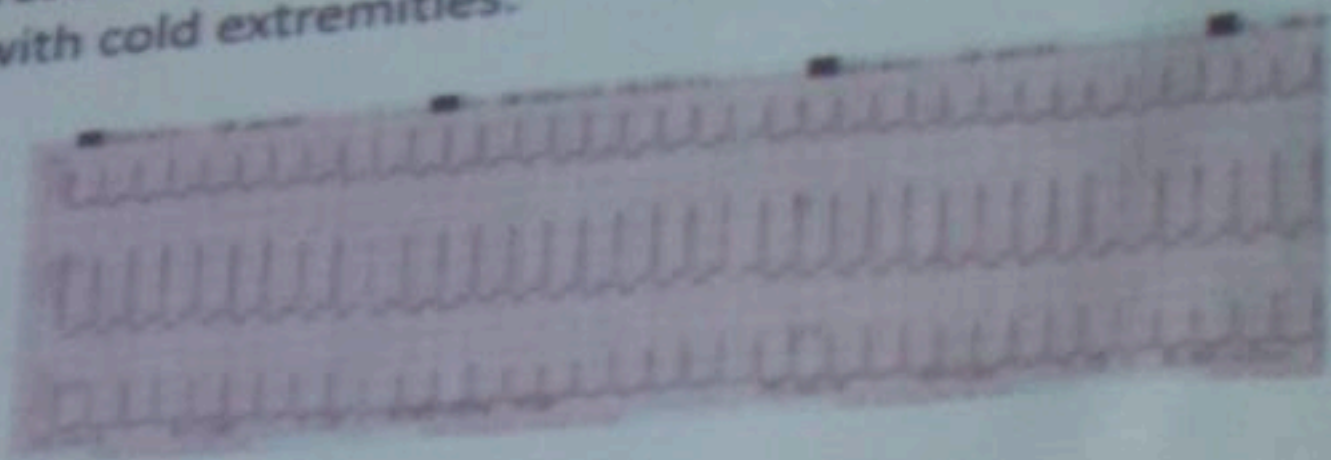
A 32-year-old female referred to cardiology out-patient clinic from the oncology department with progressive dyspnea. She gives a history of chemotherapy and radiotherapy. She has this recent chest X-ray.

Q 6- What is the next recommended investigation?

- A. ECG
- B. MSCT pulmonary angio
- C. Echocardiography
- D. SPECT



25-year-old female patient presenting with sudden onset of rapid palpitation.
Her BP is 90/60. She is dizzy with cold extremities.



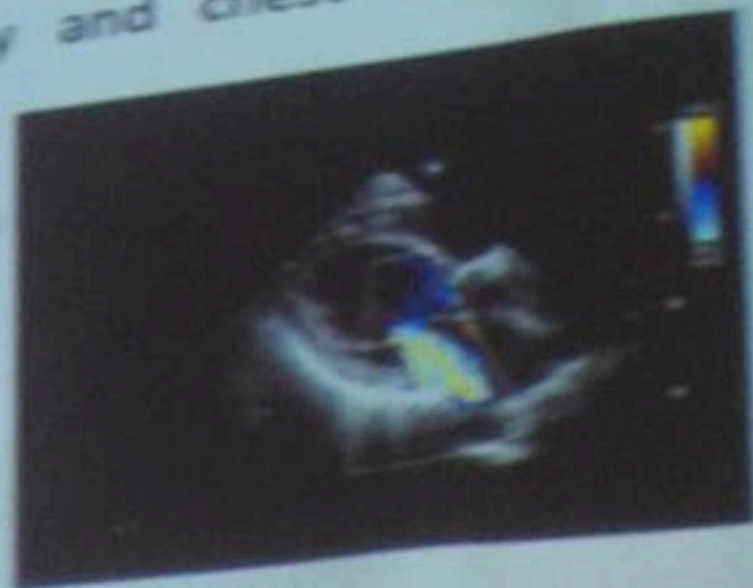
Q 16- What is your next step ?

- A. Oxygen and sedation
- B. IV beta blockers
- C. DC cardioversion
- D. IV verapamil

A 54-year-old man with past history of type 2 diabetes mellitus presents to your clinic with progressive shortness of breath. His BP is 140/80 and respiratory rate of 24/min. After clinical examination, an ECG, echocardiography and chest X-ray are performed. The echo is given below.

Q 2. Which of the following is the correlated finding on auscultation of the apex?

- A. Mid-diastolic murmur
- B. Diastolic rumbling murmur
- C. Pansystolic murmur
- D. S3



A 32-year-old female referred to cardiology out-patient clinic from oncology department with progressive dyspnea. She gives a history of chemotherapy and radiotherapy. She has this recent chest X-ray.

Q 6- What is the next recommended investigation?

- A. ECG
- B. MSCT pulmonary angio
- C. Echocardiography
- D. SPECT

